

TO: Youth Basketball Coaches/Interested Coaches

FROM: Jeff Hagen, Sports & Fitness Administrator

Redmond Parks and Recreation

DATE: September 2, 2008

RE: Upcoming Youth Basketball Season

We are beginning preparation for the upcoming Youth Basketball season. As you know, a major issue has always been team formations. If you need any clarification as to how teams are formed please ask me prior to registration. Enclosed is an information packet we are required to have filled out by all volunteers.

<u>Returning Coaches</u> must confirm they are planning to coach again this year by returning the application packet no later than September 30th. Application forms are REQUIRED for all new, and returning coaches.

<u>New Coaching Applicants</u> will be informed of their coaching status after the registration closing date. However, new applicants should return their coaches applications in advance as well.

The Coaches application may be returned to me at the Old Redmond Schoolhouse Community Center located at 16600 NE 80th Street, Redmond. It may also be returned by fax at 425-556-2363, or by mail to:

Redmond Parks and Recreation, MS: ORSPK ATTN: Jeff Hagen PO BOX 97010 Redmond, WA 98073-9710

MEETING DATES

There will be a coaches meeting and a coaches training. I will inform you of these dates at a later time. Please plan on attending each of these meetings.

I can be reached by e-mail at jhagen@redmond.gov or by calling 425-556-2312. Please don't hesitate to contact me if you have any questions. I look forward to working with a great team of volunteer coaches with the goal of making this season a great experience for the kids here in Redmond!

Redmond Parks and Recreation Department YOUTH BASKETBALL VOLUNTEER COACH APPLICATION

NAME				
ADDRESS		CITY		ZIP
PHONE NUMBER (day)		(e	ve)	
E-MAIL				
BIRTH DATE	DRIVERS	S LICENSE #		
Please list any previous coach	ing or teaching	experience with you	uth:	
SPORT	AGE	ORGANIZAT		DATE
Have you ever been convicted				
With what grade level would y	ou like to work	?		
Would you prefer to coach:	Girls	Boys	No Pr	eference
Elementary school nearest to	your home:			
Do you have a child in the lea	gue that you wo	ould like to coach?	Yes	No
If yes, please print their name	clearly			
REFERENCES (must list three	different referer	nces):		
Name:	Address:		Pho	ne #
Name:	Address:		Pho	ne #
Name:	Address:		Pho	ne #
I affirm that, to my knowledge advised that an investigative reposition thereto. I understand I agree to uphold the Redmond Pathe back of this form.	port may be prep have the right to	pared on all informati o request a report of	ion contained the findings	d herein, and I hereby of the investigation.
Signature of Applicant			ate	

COACHES CREED

As a coach in the Redmond Parks and Recreation Department Youth Sports Program,

I will:

- 1. promote fun and recreation; competition is secondary
- 2. promote an atmosphere of respect and fair play among the children, coaches and parents
- 3. respect the individual rights of every child in the program
- 4. maintain a positive, enthusiastic attitude at all times
- 5. emphasize praise, praise lavishly and not criticize when in the presence of others
- 6. understand that by being coach, I am a role model to many children

PARENTS' CODE OF CONDUCT

I hereby pledge to provide support, care, and encouragement for my child in youth sports by following the Parents' Code of Conduct.

I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth sports event.

I will place the emotional and physical wellbeing of my child ahead of a personal desire to win.

I will remember that the game is for youth, not adults.

/ will do my best to make youth sports fun for my child.

I will support coaches and officials working with my child in order to encourage a positive and enjoyable experience for all.

I will ask my child to treat other players, coaches, spectators, and officials with respect regardless of race, sex, creed or ability.

I know that it is my child's right to play in a safe and healthy environment.

I know that it is my child's right to play in a sports environment that is free of drugs, tobacco, and alcohol, and will refrain from their use at all youth sports events.

Redmond Parks and Recreation Department

COACH CREED AND CODE OF CONDUCT AGREEMENT YOUTH SPORTS LEAGUES

I have read and understand the Coaches' Creed and Code of Conduct issued by the Redmond Parks and Recreation Department Youth Basketball League. I understand that if I violate any of the conditions stated in the Creed and/or Code of Conduct, I will be subjected to the penalties. I understand the Creed and Code of Conduct applies to coach conduct before, during, and after all league games and practices. In addition, coaches will be held liable for damages caused by willful, destructive conduct. Signature of Coach Date Signature of League Coordinator Date Please keep the Coaches' Creed and Code of Conduct to refer to throughout the season. Just return this sheet with your signature and date. Thank you



City of Redmond Authorization for Background Investigation

	, hereby	
Redmond or an independent investigat of my personal and professional back records.		
hereby release any current or form employees from any and all liability res authorization and release from liability effective for employment investigations	sulting from the release of are voluntary acts. This	such information. My authorization shall be
t is my intention that any copy of this a	authorization be as effectiv	e as is the original.
Applicant's Name:Last	First	Middle
Alias/Maiden/Other Name(s):		
Address:	City/Zip	
Home Phone	Cell Phone:	
Date of Birth: Month/Day/Year	Sex: Race:	
Social Security Identification Number:		
Oriver's License #:	Exp. Date:	State:
Signature		

NOTIFICATION AND AUTHORIZATION FOR BACKGROUND INVESTIGATION DISCLOSURE STATEMENT

I. APPLICABILITY

This form applies to the following applicants:

<u>Prospective Employees:</u> Any prospective employee who will or may have unsupervised access to children under sixteen years of age or developmentally disabled persons or vulnerable adults during the course of his or her employment or involvement with the City; and

<u>Prospective Volunteers:</u> Any prospective volunteer who will have regularly scheduled unsupervised access to children under sixteen years of age, developmentally disabled persons, or vulnerable adults during the course of his or her employment or involvement with the City under circumstances where such access will or may involve groups of (i) five or fewer children under twelve years of age, (ii) three or fewer children between twelve and sixteen years of age, (iii) developmentally disabled persons, or (iv) vulnerable adults.

II. NOTIFICATION

Pursuant to RCW 43.43.834(1), the applicants described in Section I above who may be offered a position as an employee or volunteer are hereby notified that an inquiry may be made to the Washington State Patrol under RCW 43.43.832 or an equivalent inquiry to a federal law enforcement agency. This inquiry includes an applicant's record for criminal convictions as defined in chapter 10.97 RCW. Inquiry to the Washington State Patrol may also be made regarding convictions of crimes against children or other persons as defined in RCW 43.43.830(6), and as amended by chapter 9A.44 RCW [sex offenses]; department of health disciplinary authority final decisions of specific findings of physical or sexual abuse or exploitation of a child and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary authority final decision; for the businesses and professions defined in chapter 9A.44 RCW; and civil adjudications of child abuse, as amended by chapter 9A.44 RCW. For positive identification, applicants described above may also be required to provide fingerprint cards or a right thumb fingerprint, which will be used only for the purposes enumerated in WAC 446-20-285 and RCW 43.43.830-43.43.845.

After processing a properly completed request for criminal history information form, if the conviction record, disciplinary authority final decision, adjudication record, or equivalent response from a federal law enforcement agency shows no evidence of crimes against persons, an identification declaring the showing of no evidence shall be issued to the business or organization by the Washington state patrol identification and criminal history section within fourteen working days of receipt of the request. Possession of such identification shall satisfy future record check requirements for the applicant for a two-year period.

The City of Redmond shall notify the applicant of the state patrol's response within ten days after receipt by the City. The City shall provide a copy of the response to the applicant and shall notify the applicant of such availability.

III. APPLICANT DISCLOSURE

Pursuant to RCW	43.43.834(2), all	applicants	described	Section I	above are	required	to disc	lose the
following informa	tion:							

(a) Have you	ever been convicted of a crime?
YES	NO

(b) Have you ever had findings made against you in any civil adjudicative proceeding as defined in RCW 43.43.830, which includes any judicial or administrative adjudicative proceeding that results in a finding

of, or upholds an agency finding of, domestic violence financial exploitation of a child or vulnerable adult up adopted under chapters 18.51 and 74.42 RCW. "Civit administrative orders that become final due to the far right afforded to him or her to administratively challe health services or the department of health under chapters 18.51 and 74.42 RCW.	nder chapter 13.34, 26.44, or 74.34 RCW, or rules I adjudication proceeding also includes judicial or illure of the alleged perpetrator to timely exercise a enge findings made by the department of social and
YES NO	
(c) Do you have both a conviction under (a) of this s of this subsection?	subsection and findings made against you under (b)
YES NO	
If the answer is "yes" to any of the above questions, court or agency), case number, date of conviction or agency findings below and make reference to the qu	agency findings, and facts of the conviction or
Applicant's printed name:	
Other names by which applicant has been known: _	
Applicant's Social Security number:	
Applicant's date of birth:	
Applicant's address:	
Applicant's prior addresses for the past ten years (in	clude dates):
IV ACKNOWI FDGM	MENT AND CONSENT
By filling out and signing this form, applicant acknown understands it and the requirements described in the Redmond to make inquiry to the Washington State F to a federal law enforcement agency as described in	vledges that he or she has read the entire form, e form, and grants permission to the City of Patrol under RCW 43.43.832 or an equivalent inquiry
Applicant understands and acknowledges that the inform will be considered by the City in its hiring of vo 1 above, to the extent allowed by law.	· · · · · · · · · · · · · · · · · · ·
False, misleading or incomplete information on this f the City as an employee or as a volunteer, or in the	
I certify (or declare) under penalty of perjury under foregoing is true and correct:	the laws of the State of Washington that the
(Date and Place)	(Signature)